



Robert E. Bush
Naval Hospital

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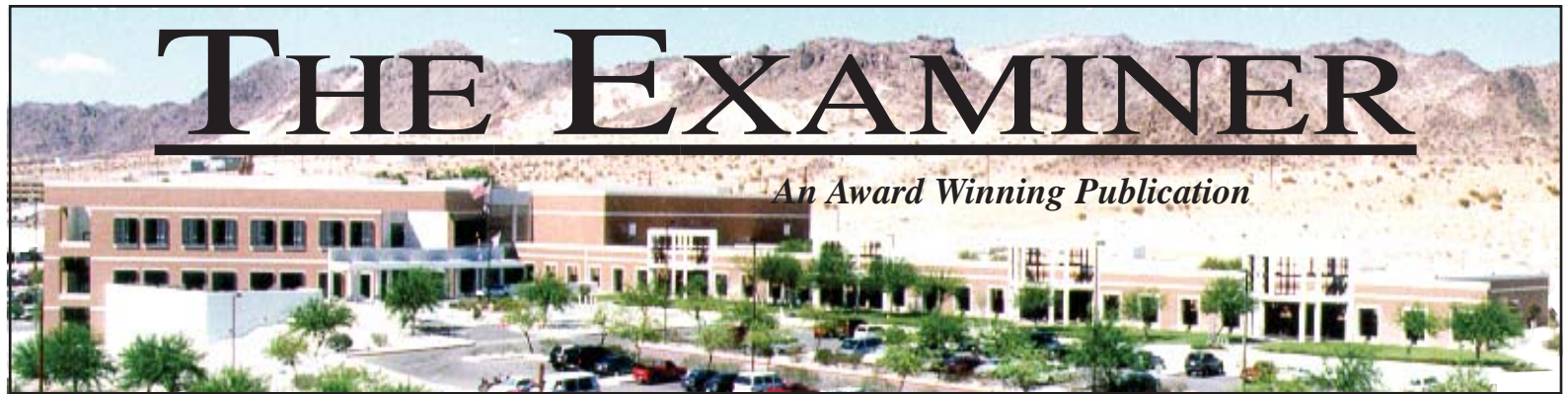
- * Through the ICE website.
- * The Hospital Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the Hospital clinics, or directly to the Joint Commission via: E-mail at complaint@jointcommission.org Fax: 630-792-5636

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Naval Hospital Public Affairs Office
Box 788250 MAGTFC
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<http://www.med.navy.mil/sites/nhtp/pages/default.aspx>

Don't Take Your Vision for Granted

By Cmdr. Rodel Divina, OD, MS, FAAO, NHTP Staff Optometrist

March is Workplace Eye Health and Safety Month. Even if you do not work in a hazardous military setting or dangerous construction zone, believe it or not, this topic may still be relevant to you. In fact, merely sitting daily in your office in front of a computer can pose a threat to your vision and eye health. Luckily, there are many workplace eye safety preventive measures that can be incorporated into your daily routine to avoid this negative impact on your eyes.

Statistically, most work-related eye injuries involve outdoor or

factory jobs where the eye is susceptible to scratches, flying foreign bodies, and chemical splashes. Nearly 2,000 people in the U.S. injure their eyes on the job daily. Moreover, one third of these employees suffer injuries so severe that they must be treated in a hospital emergency room.

The Bureau of Labor Statistics reports that almost three out of five workplace eye injuries are the result of not wearing proper eye protection like goggles, face shields, helmets, and safety glasses. As such, appropriate eye protection must be worn at all times. This is especially rel-

Continued on Page 2; please see, Vision.



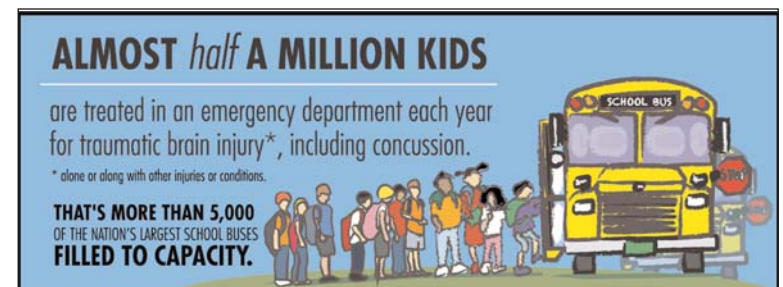
Ms. Debbie Lopez, NHTP extern and a fourth-year optometry student from Western University College of Optometry, performs a routine eye examination in Clinic D.

Brain Trauma Knows No Bounds Affecting Military and Children

By Roxanna Farinpour, PhD, Clinical Neuropsychologist, NHTP Deployment Health

The Department of Defense (DoD) and the Brain Injury Association of America (BIAA)

Americans sustain a TBI. That is one TBI every 23 seconds. A TBI can occur anywhere, any time and to anyone. In a matter of seconds, a TBI can change a life and result in critical changes in physical, behavioral



recognize March as Brain Injury Awareness month. Since 1984, brain injury victims, their families, advocates, and providers have used the month of March to increase awareness of Traumatic Brain Injury (TBI).

In keeping with this important aim and the DoD's continued commitment to TBI care, we at the TBI program at Naval Hospital at Twentynine Palms, take this opportunity to bring the issue of TBI in our military communities, to the forefront.

What is a TBI? According to BIAA, an "outside physical force," for example a helmet-to-helmet collision, causes a TBI. This physical force disturbs normal brain function. It is common to hear about a helmet-to-helmet collision during a football game, martial-arts training, or among our youth while playing in school. For those who have parents or elderly family members, falls increase with age, which increases the opportunity for a TBI to occur.

Each year, one million

and cognitive functioning. The CDC estimates that 5.3 million Americans have life-long disabilities as a result of a TBI. Direct and indirect costs for TBIs in the US, total over \$56 billion, annually.

In the military, TBI became the signature injury for the wars in Iraq and Afghanistan. According to the Defense and Veterans Brain Injury Center, 375,230 Service Members were diagnosed with a TBI between 2000-2017. The high rate of TBIs in the military led to DoD initiatives to improve TBI identification and treatment. While combat related TBIs have historically been the focus of past military health initiatives, many Marines, Sailors, Soldiers and their families may be surprised to discover that most of the TBIs in the military occur in garrison. In 2013, the DoD reported that 80 percent of TBIs among military personnel occurred in non-deployed settings with the most common

Continued on Page 3. Please see TBI.

evant to hospital workers who could be exposed to bodily fluids contaminated with infectious diseases.

Surprisingly, working in an office can also pose a major threat to your eyesight. Technology, specifically computers, is the major culprit. By spending eight hours in front of a computer screen every day, your eyes' ability to function normally could be greatly altered. As a result, you might start to suffer from Computer Vision Syndrome (CVS), a condition caused by focusing your eyes on a computer display for a prolonged period of time without taking breaks. People with CVS complain of blurred vision, double vision, dry-eye issues, headaches, neck pain, back strain, and dizziness. The good news is that all these symptoms are preventable.

Here are a few tips on how to prevent CVS:

- * Blink frequently. Blinking often will prevent your eyes from drying out during protracted computer work and reading.
- * The 20-20-20 rule. In order to keep your eyes from becoming strained in front of the computer screen, take a break by following the 20-20-20 rule:

Every 20 minutes look at an object at least 20 feet for 20 seconds.

* Use artificial tears. Over-the-counter eye drops can lubricate the surface of your eyes throughout the day and make them feel comfortable.

* Reposition your screen. Ensure that your screen is at least 30 inches away from your face. Also, consider placing an anti-glare screen over your monitor to make what you see on the monitor gentler on your eyes.

* Schedule a regular comprehensive eye exam. It is important to receive an eye exam performed by a licensed optometrist regularly. Consequently, you will be informed if you need to wear eye glasses to see better far away, up close, and/or at the computer. Additionally, your eye doctor will be able to detect any sight-threatening eye diseases.

The Naval Hospital Twentynine Palms Optometry Clinic provides comprehensive eye exams to active duty personnel. Call us during regular clinic hours at (760) 830-2458 for an appointment. Eligible beneficiaries may receive acute eye services on a case by case basis.



Lt. Michael Kantar, NHTP Department Head, Nutrition Management Department, provided a Commissary overview February 22, providing Commissary patrons with healthier eating tips, grilling tips, smart grocery choices and information on how to handle produce to make it last longer.



HMC Christbert Barbon conducts a leadership briefing for approximately 30 students from Yucca Valley and Twentynine Palms high schools in NHTP Classrooms 4 & 5 March 1. The Navy hospital was one of several Combat Center stops for the leadership class, said Math and Leadership teacher, Terry Burdett, Twentynine Palms High School. "We're giving them real-world examples of leadership," Burdett said. Other Combat Center briefings included the Sergeant's Course and a military police dog-handling demonstration.

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causes being motor vehicle accidents (in private or military vehicles), falls, sports and recreational activities, and military training exercises.

The high rate of non-combat related TBIs in the military should come as no surprise as active duty personnel are a group inherently made up of young men, statistically those at greatest risk for TBI in the general population. Couple these population statistics with combat training and the all too common high risk recreational activities in this group such as biking, riding motorcycles, extreme sports and so on, as well as the physical training that is expected as part of everyday life; and you have a hot bed for TBIs and the potentially debilitating or disabling consequences.

And let’s not forget the spouses and children of military members. They live and grow up in a culture that values physical activity, participation in sports, and other activities that place them at greater risk for TBI. Thus, as family members of the military, they too are at high risk for sustaining a TBI and are in need of services within our military healthcare communities.

The large majority of TBIs that occur are mild in severity, often called a concussion. Most people who sustain a concussion make a good recovery; but it is important to take what some might consider minor, seriously. Even minor bumps to the head can lead to brain bleeds or other serious conditions. Continuing to play in sports after a concussion can result in more serious brain injury and even death.

Thus, in sports it is critical to remove the individual from further play. It is always best to seek medical care when there are signs of a concussion.

So how do you identify symptoms of a concussion? While there is no one defining symptom, common symptoms include: memory problems, confusion, drowsiness or feeling sluggish, dizziness, double vision or blurred vision, headache, nausea or vomiting, sensitivity to light or noise, balance problems, and slowed reaction time.



Because problems can start in 24 or even 48 hours after a head injury, anyone suspected of having a concussion should be monitored for worsening symptoms. Do NOT take aspirin or anti-inflammatory medications such as ibuprofen or other nons-

teroidal anti-inflammatory drugs such as Motrin or Advil, after a potential concussion. These medicines can increase risk for brain bleeds and mask symptoms.

If symptoms worsen or there is onset of serious medical complication like seizure, loss of consciousness or excessive vomiting, you should seek medical attention, immediately!

There is no cure for a TBI. Prevention is the only way to avoid brain injury. Unfortunately, many simply for-

get or take short cuts, actions that can lead to devastating consequences. To help you protect yourself and your loved ones, take a moment to review the following safety prevention tips: **Prevention for Adults**

- Buy and use helmets or protective head gear approved by

the American Society for Testing and Materials (ASTM) for sports 100 percent of the time. Helmets must fit properly!

- Wear a seatbelt every time you drive or ride in a motor vehicle.

- Never drive while under the influence of drugs or alcohol or ride with an intoxicated driver.

- Do not text or use a cell phone while driving.

- Keep firearms unloaded and in a locked cabinet or safe, and store ammunition in a separate, secure location.

- Settle disputes in a non-violent way.

- Reduce fall hazards in your home--secure rugs, loose cords, put toys away, and eliminate any tripping hazards.

Prevention for Children

- Use seatbelts and appropriate booster chairs for children riding in a motor vehicle.

- Avoid playgrounds with asphalt, concrete, grass and soil surfaces.

- Always stop at the curb or edge of the road with children.

- Never shake a baby or young child.

- Ensure a protective ASTM-certified helmet is used and fits properly when participating in sports or other high-risk activities. Don’t compromise!

- Avoid unnecessary roughness in sports and activities.
- Avoid loose fitting masks for

Halloween as falls are the leading cause of injury on Halloween. Use face paint or cosmetics.

- Install window guards.
- Always supervise at pools.

We offer one-on-one patient education, group and unit education, provider resources and direction on DoD applications, brochures and pamphlets. The TBI Clinic is comprised of a neuropsychologist, a physician’s assistant, a psychometrist, a psychiatric technician and a program manager. The clinic also has access to ancillary services such as neurology, speech pathology, neuroimaging, occupational therapy and more. The TBI Clinic and Naval Hospital Twentynine Palms provides post-acute care and services for active-duty personnel and family members, age 16 and older.

Should you have any questions about TBIs and related health-care services offered in our military community, please contact the TBI Clinic on base at (760) 830-2948/2724.



Awardees...

The following awards were presented during the First Friday Award Ceremony, February 2, 2018, in NHTP Classrooms 4 & 5. Hospital Commanding Officer, Capt. Patrick Amersbach (Acting), was the presenting officer with Executive Officer Capt. Jeffrey Bledsoe (Acting) and Command Master Chief Victor Isarraraz (Acting).



Lt. Temitope Ayeni is awarded the Navy and Marine Corps Commendation Medal.



Hospital Corpsman Second Class Joseph Grabianowski is presented with the Joint Service Commendation Medal.



Hospital Corpsman Third Class Riley Driscoll is presented with a Letter of Appreciation attesting to "his outstanding performance" as a General-Duty Corpsman in the NHTP Emergency Medicine Department.



Hospital Corpsman Second Class Mercedes Maebane is presented with a Letter of Commendation signed by Rear Adm. Paul Pearigen citing her selection as NHTP Junior Sailor of the Quarter for fourth quarter FY 2017.



Hospital Corpsman First Class Tia Brown is awarded the Navy and Marine Corps Achievement Medal in support of her selection as NHTP Senior Sailor of the Year for FY 2018. Additionally, in a separate presentation, HMI Brown was presented with a Letter of Commendation signed by Rear Adm. Paul Pearigen, citing her selection as NHTP Senior Sailor of the Year for FY 2018.



Ms. Latrease Burton is presented with a Letter of Commendation citing her selection as NHTP Senior Civilian of the Quarter for the first quarter, FY 2018.



Hospital Corpsman Second Class Christina Keithley is awarded the Navy and Marine Corps Achievement Medal in recognition of her selection as NHTP Junior Sailor of the Year for FY 2017.



Lt. Cmdr. Jeffrey Moore's wife replaces lieutenant's devices with his dad's lieutenant commander insignia following a promotion ceremony on the Clinic patio March 2.



The Medical Homeport Blue Team won Best of the Best NHTP department for customer care for the first quarter, FY 2018. The results were tallied from customer comment cards and survey feedback results. "We're dedicated to providing a positive patient experience," said front-desk administrative assistant, Ms. Jada Walden. L-R: Capt. Jeffrey Bledsoe, Ms. Jada Walden, Ms. Aimie Kipfer, Capt. Patrick Amersbach, HMCS Victor Isarraraz.



Combat Center Commanding General, Maj. Gen. William Mullen III, inspected the Navy enlisted barracks Feb. 14. Hospitalman Tom Sailors had the pleasure of showing off his room to the CG and his Command Staff. The CG and his entourage also stopped by the NHTP boiler room for a briefing on NHTP infrastructure.



The Navy Medical Corps' 147th Birthday was celebrated outside the NHTP Chaplain's Office March 2. Congratulatory letters addressed to Rear Adm. Paul Pearigen, Chief, Medical Corps were read from Vice Adm. C. Forrest Faison, Rear Adm. T.A. Davidson, Rear Adm. A.M. Swap, Force Master Chief H. Smith Jr. and Dr. Andrew Jones. A letter congratulatory letter addressed to his Medical Corps Colleagues was also read from Rear Adm. Pearigen. Above left: NHTP Medical Corps officers pose together before partaking in the white-chocolate layered birthday cake. Top right. The youngest, Lt. Amedeo DeLuca-Westrate (3rd Battalion/7th Marines) and the oldest, Lt. Cmdr. Anthony Biascan, have the honor of cutting the cake.



Introducing New Staff -- Welcome Aboard!



Lt. Cmdr. Leah Moss

Lt. Cmdr. Leah Moss arrived from Naval Medical Center San Diego where she worked in the ER. A physician assistant, Moss said she is passionate about working in primary care. “Kids, adults, the elderly, active duty--seeing patients throughout their continuity of care is what I love,” Moss said. Born at Elmendorf Air Force Base in Alaska, Moss calls Washington D.C. hometown. Her dad served 26 years in the U.S. Coast Guard. Moss has been in the Navy for almost 10 years. She earned her Master’s degree of Physician Assistant studies from the University of Medicine and Dentistry of New Jersey (now Rutgers University) and her Bachelor of Science degree from Columbia Union College, Takoma Park, Maryland. Moss met her husband in middle school. She said the family loves Navy life, the change of duty stations and the thrill of immersing themselves in new cultures. Moss will be working in the Marine-Centered Medical Home Port in the AMCC.



HM1 Gregory Kite

Hospital Corpsman First Class Gregory Kite arrived from Yokosuka, Japan, where he was IDC on the USS Curtis Wilbur (DDG 54). “Being an Independent Duty Corpsman on a destroyer is probably the hardest job a Corpsman can do,” Kite said. Combining medical care, program management and all of the shipboard responsibilities of being a first-class petty officer is a lot of responsibility, he said. Kite spent three years aboard the Navy destroyer and has been in the Navy for 12 years. Hometown is Yucaipa, California. Kite requested the NHTP assignment. He’ll be IDC at the AMCC. He looks forward “to having a place to bounce ideas and thoughts off,” as opposed to being on his own in the middle of the ocean. He’s here with his wife and seven-year-old son and four-year-old daughter. HM1 Kite has taken a few college courses. His academic goal is to becoming a high school math teacher following his Naval career. Hobbies include backpacking and camping.



Mr. Jason Arestizable

Mr. Jason Arestizable is the new maintenance worker in the NHTP Facilities Maintenance shop. Arestizable owned a construction company in Albuquerque, New Mexico, where he employed four two-men crews performing door and trim on multi-family and custom houses. But the economy crashed (2006-2008) and Arestizable moved back to his hometown, Twentynine Palms. He’s worked for Lincoln Military Housing, on base as a plumber, as well as for other construction firms in the area. Most recently, he’s worked as a janitor for one of the maintenance-contract firms on the Combat Center. “Everything here is right up my alley,” Arestizable said after four weeks on the NHTP job. “It gets my creative side going,” he said of the varied projects he’s been assigned so far. Arestizable has three children, ranging from 16 to 21. A former youth-baseball coach, Arestizable loves baseball, hiking and building wood-working projects at home.



Ms. Alyson Holt

Ms. Alyson Holt is the new Administrative Assistant at the AMCC. Prior to arriving with her husband to this duty station, she worked 10 years in health-care at a facility in Pensacola, Florida. She’s here with her husband, a Corpsman in the NHTP lab, and her two children. This is the Holt family’s first duty assignment. Alyson Holt said she likes the “quiet and peacefulness” of Twentynine Palms. “It’s easy access to get everywhere. And since I like to travel, it’s a great experience,” she said. So far, they’ve been to the Palm Springs Tramway, Venice Beach, Las Vegas (two times); and they’ve identified some trails they plan on hiking. She’s finishing her Bachelor’s degree in healthcare management from Southern Illinois University, Carbondale Campus. She said she’s attracted to healthcare because she has a natural tendency to help others. ” she said. Holt aims to eventually be in top management and eventually open her own assisted-living facility.



Lt. Cmdr. Raoul Archambault

Lt. Cmdr. Raoul Archambault arrived to the command last October. He arrived from Navy Branch Health Clinic Gulf Port Mississippi where he was Pharmacy Department Head and Head of Ancillary Services. At NHTP, he’s Department Head of the Pharmacy. He’s been in the Navy for 12 years. Hometown is Fort Knox, Kentucky. He has his Doctor of Pharmacy degree from the University of Rhode Island. Archambault requested the NHTP assignment. A prior-enlisted U.S. Marine, he originally joined up as a Marine recruit, became an air-traffic controller with MWSS 374, and after six years of active-duty service and two years reserve, he attained the rank of sergeant. “I love the vastness of the ocean and of the desert,” he said. Now on his third Twentynine Palms tour, Archambault served a tour at NHTP which ended in 2009. Archambault lives in Yucca Valley with his wife, a registered nurse. For hobbies, Archambault says they enjoy “anything adventurous outside.”

April is Sexual Assault and Awareness Month--Protecting our People Protects Our Mission

By Lt. Cmdr. Esther Colbert,
RN-BSN, SAFE Program
Manager

Sexual assault is a personal and destructive crime; and it negatively impacts our entire community. Unfortunately, sexual assault is still prevalent. The 2017 Annual Report on Sexual Assault in the Military shows that 14,900 service members were sexually assaulted in 2016. Of that number, less than half (6,172 military and dependent beneficiaries) chose to file a sexual assault report.

Rear Adm. Ann Burkhardt, Director of DoD's Sexual Assault Prevention and Response Office, stated: "The

hard truth is still far too many of our people find their lives changed by this crime and there are far too many who continue to suffer in silence." Rear Adm. Burkhardt went on to say: "Protecting service members and their families from sexual assault does protect our mission, and we will not cease our efforts until we get this right."

At Naval Hospital Twentynine Palms, our staff is dedicated to providing victims of sexual assault with compassionate victim support, exceptional medical care, and thorough forensic evidence collection.

What is sexual assault?



Training exercise: Sexual Assault Medical Forensic Examiner, Lt. Cmdr. Mary King, collects evidence during a training exercise from SAMFE Assistant, Hospital Corpsman Third Class Jonathan Rodney, who assumed the role of patient.

Region Says: NHTP SAMFE Team Sets the Standard

The NHTP Sexual Assault Medical Forensic Examiner (SAMFE) team is committed to providing exceptional care to adult patients affected by sexual violence. The SAMFE team is composed of providers, registered nurses and hospital Corpsmen who have received specialized training to provide trauma-informed care.

By extending a healing and supportive approach to these patients, we hope to preserve the patient's dignity, and to support efforts to restore their well-being.

On February 21-22nd, NHTP hosted a site visit by Navy Medicine West's Sexual Assault

Medical Forensic Training Officer, Cmdr. Michelle French. During Cmdr. French's visit, she inspected the SAMFE Program, provided annual sustainment training, and observed an unfolding SAFE drill, conducted by all examiners. As a certified Sexual Assault Forensic expert with 16 years of SAMFE experience, Cmdr. French is a respected leader throughout the military forensic community. Her interactive sustainment training and guidance were well received by all. During this training evolution, Hospital Corpsman Third Class Johnathan Rodney, an NHTP SAMFE assistant, was recognized for his professionalism and the high-quality patient care

The DoD SAFE Helpline (<https://safehelpline.org>) defines sexual assault as sexual contact that occurs without your consent. It is a crime. Sexual assault is intentional sexual contact, characterized by use of force, physical threats, or abuse of authority; or when the victim does not or cannot consent. In these cases, it may be a sexual assault even if you did not physically resist the assailant. Sexual assault can occur without regard to gender or spousal relationship or age of victim.

What is the SAFE Program and what is the role of the SAMFE?

A SAMFE is a Sexual Assault Medical Forensic Examiner who provides victims of sexual assault with a head-to-toe medical forensic exam, known as a SAFE (Sexual Assault Forensic Exam).

What sexual assault services are available at NHTP?

NHTP offers a SAFE to adult beneficiaries eligible for care in the military healthcare system. These exams are available up to seven days (or 120 hours) following a sexual assault. Exam services are accessible 24 hours a day, seven days a week. Restricted and Unrestricted reporting options are available.

What do you do if you or someone you know is a victim of sexual assault?

he displayed during several recent SAFE cases. Selected to represent the NHTP SAMFE assistants during the drill, his engagement and professional insight were instrumental in yielding outstanding training results. Acting in the role of the "victim" throughout the drill, HM3 Rodney exhibited the critical importance of the compassionate, trauma-informed care that was provided.

The SAMFE training evolution During Cmdr. French's out-brief with NHTP leadership, she said: "NHTP has an outstanding SAMFE Program. Your team is dedicated, meticulous, and setting the standard across the Region. We (Region) are very impressed."

The most important step is for you to immediately get to a safe location away from the perpetrator. At your earliest opportunity either contact the Base Sexual Assault Response Coordinator's 24/7 Sexual Assault Support Line (760) 799-0273; or report directly to the NHTP Emergency Room. If you choose to change personal hygiene items or your clothes from the assault, please bring all items in a paper bag with you to the ER. Try to minimize performing any activity that may remove evidence from your body such as bathing, washing hands, brushing your teeth, smoking, eating or drinking, etc. In the field of Medical Forensics, time is evidence. The longer it takes to report, the less likely forensic evidence will be obtainable.

What should you expect when you report?

Patients who report a Sexual Assault will be escorted to the NHTP Emergency Room and immediately placed in a private room. The ER provider will evaluate the patient and treat any immediate medical concerns. During the ER visit, the provider will screen for exposure to sexually transmitted infections, and discuss prophylactic medication treatments. At this time, the patient may also request to speak with a victim's legal counsel for additional legal guidance.

After ensuring that the patient has been medically treated, the SAMFE team will explain the SAFE process and obtain consent from the patient to perform the exam. The patient can decline or change their mind at any time throughout the exam, without affecting the medical care they receive.

Accompanied by the victim's advocate, the SAMFE will escort the patient to a private clinical exam room for the completion of the exam. Depending on the patient's needs, a SAFE may take several hours to thoroughly complete. Food, drinks, and the option to change your clothes and shower will be provided throughout the exam. The patient decides if the evidence will be turned over to law enforcement, or if it will be stored in a secure evidence storage facility for up to five years from the date the SAFE was collected.

The NHTP SAMFE Team's Commitment:

Throughout the exam, the NHTP SAMFE Team is dedicated to ensuring that each patient's privacy, dignity, and confidentiality are respected. Our goal is to avoid re-victimization, and to support efforts to restore the patient's well-being through the provision of comprehensive and compassionate care to adult victims of sexual assault.

3 IN 4
people with Hepatitis C
were born during
these years

People
born from
1945-1965 are
5X MORE LIKELY
to have
Hepatitis C

Left untreated,
Hepatitis C
can cause:

**LIVER
DAMAGE
FAILURE
CANCER**

**MORE THAN
One Million**
people living with
Hepatitis C **DO NOT
KNOW THEY ARE**

Many
people can
live with
HEPATITIS C
FOR DECADES
WITH NO
SYMPTOMS

BORN FROM 1945-1965?
**GET TESTED FOR
HEPATITIS C**

